

Vaccinal Ethylmercury & Neurologic Sequelae

Testimony Presented By

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Hearing

“Mercury in Medicines – Are We Taking Unnecessary
Risks?”

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My name is Albert Enayati. I am President of the Cure Autism Now! Foundation's New Jersey chapter. Our foundation headquarters are located in Congressman Waxman's district. My wife Sima and I are scientists who have worked for pharmaceutical companies. We have a child with autism.

Mr. Chairman, in 1971, when my wife and I were growing up in Iran, a tragic event was taking place in our neighboring country Iraq. In October of that year, Iraq imported more than 90,000 tones of grain treated with methylmercury. Much of the grain was used as daily baked bread. The reports from Iraq were shocking. The extensive mercury poisoning caused thousands of Iraq farmers and their families to become neurologically damaged. Hundreds died. The Iraqi episode is not unique. Similar misfortunes include mercury epidemics in Minamata, Japan, Guatemala and Russia. In the first half of the century, poisoning of infants and toddlers by mercury in teething powders led to acrodynia or Pink Disease.

Today, another mercury tragedy is unfolding, this time among our children. As a scientist and parent, I sadly declare that ethylmercury in vaccines has been causing autism, ADD and other neurodevelopmental diseases in children who -- as susceptible infants and toddlers -- were injected with thimerosal, a vaccine preservative which is 49.6% ethylmercury by weight.

In 1982, 18 years ago (as detailed in Federal Register Vol.47. No. 2) an FDA panel concluded that thimerosal is toxic, causes cell damage, can cause allergic reactions, and is not effective in killing bacteria or halting their replication.

A recent Hepatitis Control Report (volume 4, number 21, 1999) details how the FDA, via its own Committee on Biologics had failed -- for 17 years since the 1982 report -- to follow their own organizational directives which specify ensuring product safety. Fortunately, because of the FDA Modernization Act of 1997, the CBER was forced to evaluate thimerosal in vaccines.

By 1998, the CBER's thimerosal study had run into difficulty. It is against Federal Statutes to add toxic material to childhood vaccines, and vaccinal-thimerosal appeared to be contrary to this important law. CBER staff then searched for safety data and guidelines but found none. In fact, the CBER learned that there is very limited literature available on ethylmercury.

The CBER team then compared ethylmercury intake with federal guidelines for “safe” mercury-intake, but again the CBER ran into difficulty: thimerosal is injected in bolus doses and is metabolized in humans to ethylmercury, but all theoretical guidelines for “safe” mercury intake were based upon ingested methylmercury. Left with no choice, the CBER team assumed that the toxicity of thimerosal injected in bolus doses was equivalent to that of methylmercury ingested gradually.

Armed with this assumption, they compared the vaccinal-ethylmercury intake in children six months old (187.5 micrograms) to the suggested safe limits by EPA. It was then that they made a remarkable discovery: even without considering infants and toddlers susceptibility to neurotoxic effects, the mercury intake from vaccinations in the first six months of life far exceeded the limit set by EPA.

Furthermore, the CBER team erred in presuming that the injected bolus doses of injected ethylmercury a child receives from vaccination is physiologically equivalent to lower-level, daily doses of methylmercury ingested by pregnant Iraq women. This CBER comparison defies common sense. It suggests that to take 30 Tylenol at once has an effect similar to that of taking one Tylenol per day for thirty days.

I believe that the FDA’s record justifies concluding that the U.S. immunization program has been in violation of Federal Statutes. Presumptions about safety have superseded safety guidelines and appropriate testing. Dangerous substances in vaccines remain untested. This negligence is inexcusable. Thousands of children and their families have been neurologically impaired by physician-injected ethylmercury; and while this happened, the responsible supervisory agency, the FDA, was “asleep at the wheel”.

Mr. Chairman, despite the FDA warning in 1982 and the known toxicity of thimerosal (1,3), the FDA allowed the continued injecting of a cell-damaging, neurotoxic product into the children. Furthermore, since 1990, the FDA and CDC increased the likelihood of neurological damage by allowing thimerosal to be injected into day-old and two-month-old infants. I am here because of my son Payam. For more than a year, he passed his developmental milestones; but after his DPT and MMR shots, Payam began not responding to his name, no longer ran to greet me when I returned from work. His spoken language disappeared, and he no longer responded to his parent’s words. Within a few months, he had begun biting himself, hitting his head against the wall, flapping hands, toe walking, and was running

aimlessly around the house. Even sleep patterns had deteriorated. All these traits appear in medical literature about mercury poisoning. Mr. Chairman, I repeat, every symptom of my son autism parallels traits known in mercury poisoning.

Many experts would have us believe that my son's regression was coincident with his vaccination. However, as a trained scientist, my reading of mercury literature indicates that every trait that defines autism can be induced by organic mercury. Not surprisingly, the FDA and CDC have asked vaccine producers to initiate a gradual discontinuance of using vaccines containing thimerosal. However, no family needs a neurologically impaired child. Injecting ethylmercury into infants and toddlers ought to be discontinued immediately and clinical research to be initiated regarding mechanisms of treatment.

Sincerely and respectfully,

Albert Enayati

1. Federal Register, vol 47 num 2, Jan 5 1982, pp436-442.
2. Hepatitis Control Report, vol 4 num 21,
<http://www.hepatitiscontrolreport.com/vol/v4n21.html>
3. Suzuki T et al. metabolic fate of ethylmercury salts in man and animal. Ch 12, p209-232 in: Mercury, Mercurials, and Mercaptans. Miller MW, Clarkson TW, editors; Charles C. Thomas, 1973.